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PTO/SB/21 (09-04)

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the Paperwork Reduction Act of 1995. no persons are required to respond to a collection of information unless it displays a valid OMB control number. SEP 2 2 2005 Application Number 10/808,129 TRATE TRADE TRANSMITTAL Filing Date March 24, 2004 First Named Inventor **FORM** Hildebrand Art Unit 1614 **Examiner Name** To Be Determined (to be used for all correspondence after initial filing) Attorney Docket Number Total Number of Pages in This Submission 10+Card P-20904.00

ENCLOSURES (Charles)												
	Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s)	ENCLOSURES (Check all that apply) Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address	After Allowance Communication to TC Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter									
	Extension of Time Request Express Abandonment Request Information Disclosure Statement	Terminal Disclaimer Request for Refund CD, Number of CD(s) Landscape Table on CD	Other Enclosure(s) (please Identify below): - Preliminary Amendment - Return Receipt Postcard									
	Certified Copy of Priority Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53	Remarks										
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	Medtronic, Inc.	\mathcal{O}										
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Printed	name Keith M. Campbell											
Date	September	(9, 2005 Reg. No. 4	6,597									
CERTIFICATE OF TRANSMISSION/MAILING												
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:												
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. •	METHOD OF PAYMENT (check all that apply)									
	Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 13-2546 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)									
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	FEE CALCULATION		·							
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	Design	200	100	100	50	130	65			
	Plant	200	100	300	150	160	80			
	Reissue	300	150	500	250	600	300			
	Provisional	200	100	0	0	0	0	 .		
	2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues) Each independent claims Multiple dependent claims Total Claims - 20 or HP = 1									
7	SUBMITTED BY									
	Signature Keith M	amphell			Registration No.	507	Telephon	^e 763-505-0405		
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PATENT

Docket No.: P-20904.00

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Hildebrand, et al.

Group Art Unit: 1614

Application No.:

10/808,129

To Be Determined

Filing Date:

March 24, 2004

For:

INTRATHECAL GABAPENTIN COMPOSITIONS

Examiner:

Mailstop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

PRELIMINARY AMENDMENT

Dear Sir:

This Amendment is being filed for consideration prior to the examination of the present U.S. patent application. The Commissioner is authorized to charge Deposit Account No. 13-2546 for fees in connection with this filing.

Prior to examination of the application, please amend the application as follows:

Amendments to the claims are found on pages 2-8 of this paper.

Remarks/Arguments begin on page 9 of this paper.

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